

TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER 09086-00224-US
		U.S. APPLICATION NO. (if known, see 37 CFR 1.5) 10/532284
INTERNATIONAL APPLICATION NO. PCT/EP2003/011585	INTERNATIONAL FILING DATE 18 October 2003	PRIORITY DATE CLAIMED 22 October 2002
TITLE OF INVENTION PREPARATION OF SUBSTITUTED INDENES		
APPLICANT(S) FOR DO/EO/US Jörg Schulte et al.		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371. 3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)) a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)). a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). 7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)). 9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)). 10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).		
Items 11 to 20 below concern document(s) or information included:		
11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. <input checked="" type="checkbox"/> A preliminary amendment. 14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76. 15. <input type="checkbox"/> A substitute specification. 16. <input type="checkbox"/> A power of attorney and/or change of address letter. 17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825. 18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4). 19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4). 20. <input checked="" type="checkbox"/> Other items or information: Form PCT/ISA/210, Forms PCT/IPEA/409 and 416, SB08 with references		

<p>10/532284</p> <p>U.S. APPLICATION NO. (If known, see 37 CFR 1.53)</p>		<p>INTERNATIONAL APPLICATION NO.</p> <p>PCT/EP2003/011585</p>		<p>ATTORNEY'S DOCKET NUMBER</p> <p>09086-00224-US</p>	
<p>The following fees have been submitted</p>				<p>CALCULATIONS</p>	<p>PTO USE ONLY</p>
21.	<input checked="" type="checkbox"/> Basic national fee	\$300	\$	300.00	
22.	<input checked="" type="checkbox"/> Examination fee				
<p>If International preliminary examination report prepared by USPTO and all claims satisfy provisions of PCT Article 33(1)-(4) \$100</p> <p>All other situations \$200</p>			\$	200.00	
23.	<input checked="" type="checkbox"/> Search fee				
<p>Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority \$100</p> <p>International Search Report prepared and provided to the Office \$400</p> <p>All other situations \$500</p>			\$	400.00	
<p>TOTAL OF 21, 22 and 23 =</p>				\$	900.00
<p><input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.</p>					
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE		
17 - 100 =	/50 =		x \$250.00		
<p>Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).</p>				\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	5 - 20 =		x	\$	0.00
Independent claims	- 3 =		x	\$	
<p>MULTIPLE DEPENDENT CLAIM(s) (if applicable)</p>				\$	
<p>TOTAL OF ABOVE CALCULATIONS =</p>				\$	900.00
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Fees above are reduced by 1/2.</p>					
<p>SUBTOTAL =</p>				\$	900.00
<p>Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).</p>				+	\$
<p>TOTAL NATIONAL FEE =</p>				\$	900.00
<p>Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property</p>				+	\$
<p>TOTAL FEES ENCLOSED =</p>				\$	900.00
				Amount to be refunded:	\$
				Amount to be charged:	\$
<p>a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.</p> <p>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>03-2775</u> in the amount of \$ <u>900.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>03-2775</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the International Application to pending status.</p> <p>SEND ALL CORRESPONDENCE TO:</p>					
				<p><i>Helena C. Rychlicki</i></p> <p>SIGNATURE:</p> <p>Helena C. Rychlicki</p> <p>NAME</p>	
<p>CUSTOMER NUMBER: 23416</p>				<p>48,179</p> <p>REGISTRATION NUMBER</p>	

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	Not Yet Assigned
		Filing Date	Concurrently Herewith
		First Named Inventor	Jörg Schulte
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
TOTAL AMOUNT OF PAYMENT (\$) 900.00		Attorney Docket No.	09086-00224-US

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																				
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)													
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)														
Utility	300	150	500	250	200	100	900.00													
Design	200	100	100	50	130	65														
Plant	200	100	300	150	160	80														
Reissue	300	150	500	250	600	300														
Provisional	200	100	0	0	0	0														
2. EXCESS CLAIM FEES																				
						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th></th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> </tr> <tr> <td>Each claim over 20 (including Reissues)</td> <td>50</td> <td>25</td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>200</td> <td>100</td> </tr> <tr> <td>Multiple dependent claims</td> <td>360</td> <td>180</td> </tr> </table>			Small Entity Fee (\$)	Fee (\$)	Each claim over 20 (including Reissues)	50	25	Each independent claim over 3 (including Reissues)	200	100	Multiple dependent claims	360	180	
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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>														
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<table border="0" style="width: 100%;"> <tr> <td><u>Indep. Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td></td> <td></td> </tr> <tr> <td></td> <td>- 3 =</td> <td>x</td> <td>=</td> <td></td> <td></td> </tr> </table>						<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				- 3 =	x	=					
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	- 3 =	x	=																	
3. APPLICATION SIZE FEE																				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																				
<table border="0" style="width: 100%;"> <tr> <td><u>Total Sheets</u></td> <td><u>Extra Sheets</u></td> <td><u>Number of each additional 50 or fraction thereof</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>17</td> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td>=</td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	17	- 100 =	/50	(round up to a whole number) x	=			
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17	- 100 =	/50	(round up to a whole number) x	=																
4. OTHER FEE(S)																				
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)														
Other (e.g., late filing surcharge): 1631 Basic National Stage fee						300.00														
1633 National Stage Examination Fee - all other ...						200.00														
1642 National Stage Search Fee - search report ...						400.00														

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	48,179
Name (Print/Type)	Helena C. Rychlicki	Telephone	(302) 658-9141
		Date	4/21/05

Application No. (if known): Not Yet Assigned

Attorney Docket No.: 09086-00224-US

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV431074171US in an envelope addressed to:

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on April 21, 2005
Date

Wendy Ketcham
Signature

Wendy Ketcham

Typed or printed name of person signing Certificate

Registration Number, if applicable

(302) 658-9141
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Letter to the United States Designated-Elected Office
Fee Transmittal
Application Data Sheet
Copy of the international application with search report attached
Form PCT/ISA/210
Forms PCT/IPEA/409 and 416
English language translation of the International application
Executed Combined Declaration/Power of Attorney
Information Disclosure Statement, SB08, with references
Preliminary Amendment
Postcard
Charge \$900.00 to deposit account 03-2775